

STATE OF INDIANA )  
 )SS:  
COUNTY OF HAMILTON )

IN THE SUPERIOR COURT NO. 6  
OF HAMILTON COUNTY

**CERTIFICATE OF COMPLIANCE FOR SMALL CLAIMS RULE 8**

\_\_\_\_\_  
(name of company)

The above named company does business in the state of Indiana as a *[check one]*  
 corporation  sole proprietorship  partnership. In small claims cases in which the claim does not exceed \$1,500.00, Small Claims Rule 8 allows a full-time employee who is not an attorney to represent the corporation, sole proprietorship, or partnership on such a claim. A sole proprietorship or partnership may be represented by an owner or partner regardless of the amount of the claim. [A limited liability company (LLC) may be represented in all cases by a manager provided for the articles of organization, or by a member if there is no provision for a manager.]

The company has appointed \_\_\_\_\_, who is a full-time employee, to represent the company in cases on the Small Claims Docket of Hamilton Superior Court No. 6. (If the company is a corporation, the appointment must be made by a duly-appointed resolution of the board of directors). The company acknowledges that it will be bound by any and all agreements relating to the small claims proceedings entered into by the designated employee and will be liable for any and all costs, including those assessed by reason of contempt, levied by the Court against the designated employee. The company further acknowledges that a new certificate must be filed with the Court if the designated employee changes.

I hereby certify that the above representations are true.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Company name

\_\_\_\_\_  
Position in company

STATE OF INDIANA            )        IN THE HAMILTON SUPERIOR COURT NO. 6  
  )SS:  
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**AFFIDAVIT OF EMPLOYEE FOR SMALL CLAIMS RULE 8**

\_\_\_\_\_ )  
(name of company)

I hereby swear or affirm under the penalties of perjury that:

- 1. I am a full-time employee with the above-named company;
- 2. I have been designated to appear on my company's behalf;
- 3. I am not currently disbarred or suspended from the practice of law in Indiana or in any other jurisdiction.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Position in Company